

# CANDIDATE / OFFICEHOLDER REPORT OF CONTRIBUTIONS, EXPENDITURES, AND LOANS

FORM C/OH

PG 1

See C/OH INSTRUCTION GUIDE for detailed instructions.		1 ACCOUNT #	2 Total pages filed: <b>7</b>
3 CANDIDATE / OFFICEHOLDER NAME	TITLE <b>Mr.</b> FIRST <b>Jeff</b> MI	OFFICE USE ONLY FILED HAYS COUNTY, TEXAS FEB 28 AM 1 15	
	NICKNAME LAST <b>Barton</b> SUFFIX		
4 CANDIDATE / OFFICEHOLDER ADDRESS	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE <b>3480 Jack C. Hays Trl. Buda, Tx 78610</b>		
5 CAMPAIGN TREASURER NAME	TITLE FIRST <b>Cyndy</b> MI	Receipt #	
	NICKNAME LAST <b>Slovak-Barton</b> SUFFIX	HD / PM	Amount
6 CAMPAIGN TREASURER ADDRESS (Residence or business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE <b>3480 Jack C. Hays Trl. Buda, TX 78610</b>	Date Processed	
7 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION <b>(512) 268-0841</b>		
8 REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) <input type="checkbox"/> July 15 <input checked="" type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final report (Attach C/OH - FR)		
9 PERIOD COVERED	Month Day Year <b>2 / 2 / 94</b>	THROUGH	Month Day Year <b>2 / 26 / 94</b>
10 ELECTION	ELECTION DATE Month Day Year <b>3 / 8 / 94</b>	ELECTION TYPE <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> General <input type="checkbox"/> Special	
11 OFFICE	OFFICE HELD (if any) <b>County Commissioner, Pct. 2</b>	12 OFFICE SOUGHT (if known) <b>Same</b>	
13 DIRECT CAMPAIGN EXPENDITURE BY OTHER INDIVIDUALS	** Direct campaign expenditures are campaign expenditures made by others without the candidate's prior consent or approval. Candidates are required to disclose this information only if they receive notification of the direct campaign expenditure. **		
	Name		
Address / PO Box, Apt / Suite #, City, State, Zip Code			
<input type="checkbox"/> additional pages			

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

GO TO PAGE 2

# C/OH REPORT: SUPPORT & TOTALS

FORM C/OH  
PG 2


14 C/OH NAME <b>Jeff Barton</b>	15 ACCOUNT #
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16 SUPPORTING POLITICAL COMMITTEE(S)  <input type="checkbox"/> additional pages	-- This listing includes political expenditures by political committees for candidates or officeholders. These expenditures may have been made without the candidate's or officeholder's knowledge or consent. Candidates and officeholders are required to report this information only if they receive notice of such expenditures. --		
	COMMITTEE TYPE  <input type="checkbox"/> GENERAL  <input type="checkbox"/> SPECIFIC	COMMITTEE NAME  COMMITTEE ADDRESS  COMMITTEE CAMPAIGN TREASURER NAME  COMMITTEE CAMPAIGN TREASURER ADDRESS	OFFICE USE

17 NO REPORTABLE ACTIVITY  Check here if no reportable activity occurred during this reporting period. (Sign affidavit below and submit pages 1 and 2 only)

CONTRIBUTION AND LOAN TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ —
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 1,150
	3. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ —
EXPENDITURE TOTALS	4. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED	\$ 204.18
	5. TOTAL POLITICAL EXPENDITURES	\$ 2,619.64

19 AFFIDAVIT



AFFIX NOTARY STAMP / SEAL ABOVE

I swear, or affirm, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

*Jeff Barton*  
\_\_\_\_\_  
Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said Jeff Barton, this the 28th day of Feb, 19 94, to certify which, witness my hand and seal of office.

*Ulrich Fritsche*  
\_\_\_\_\_  
Signature of officer administering oath

Ulrich Fritsche  
\_\_\_\_\_  
Print name of officer administering oath

Deputy Co. Clk - Travis Co.  
\_\_\_\_\_  
Title of officer administering oath

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

See INSTRUCTION GUIDE for detailed instructions.				1 Total pages Schedule A: <b>2</b>
2 FILER NAME <b>Jeff Barton</b>			3 ACCOUNT #	
4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC	7 Amount of contribution (\$)	8 In-kind contribution description(if applicable)	
6 Contributor address: City: State: Zip Code				
9 Principal occupation		10 Employer (optional)		
Date	Full name of contributor <input type="checkbox"/> out of state PAC	Amount of contribution (\$)	In-kind contribution description(if applicable)	
Contributor address: City: State: Zip Code				
Principal occupation		Employer (optional)		
Date	Full name of contributor <input type="checkbox"/> out of state PAC	Amount of contribution (\$)	In-kind contribution description(if applicable)	
Contributor address: City: State: Zip Code				
Principal occupation		Employer (optional)		
Date	Full name of contributor <input type="checkbox"/> out of state PAC	Amount of contribution (\$)	In-kind contribution description(if applicable)	
Contributor address: City: State: Zip Code				
Principal occupation		Employer (optional)		
Date	Full name of contributor <input type="checkbox"/> out of state PAC	Amount of contribution (\$)	In-kind contribution description(if applicable)	
Contributor address: City: State: Zip Code				
Principal occupation		Employer (optional)		

See attached computer print-out: 1 page

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If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

**Candidate/Officeholder  
Contributions other than loans**

Name of Candidate/Officeholder: **Jefferson Barton***Schedule A*

Date	Contributions (name and address)	Money or equivalent	Market Value of gifts
2/21/94	Orvis Meador Jr., D.D.S. 6714 N. New Braunfels San Antonio, TX 78209	25.00	
2/17/94	Woody Cox 6703 B Skynook Austin, TX 78745	100.00	
2/17/94	M.D. Heatley 108 Rogers Ridge San Marcos, TX 78666	50.00	
2/14/94	Gay R. Dahlstrom P.O. Box 1230 Buda, TX 78610	500.00	
2/11/94	Mrs. Orvis Meador, Sr. 153-D Treasure Way San Antonio, TX 78209	25.00	
2/10/94	Joe Meador 2210 Camelback San Antonio, TX 78209	25.00	
2/8/94	<i>Hays County Women's Political Caucus</i> 906 Hillyer San Marcos, TX 78666	250.00	
2/8/94	John Meador, M.D. 3203 W. Autumn Run Circle Sugar Land, TX 77479	25.00	
2/4/94	Danny and Sandy Rouch P.O. Box 1018 Kyle, TX 78640	100.00	
2/2/94	Donald Taylor Rt. 1 Box 11C Buda, TX 78610	50.00	

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\$1,150

## POLITICAL EXPENDITURES

## SCHEDULE F

See INSTRUCTION GUIDE for detailed instructions.		1	Total pages Schedule F:
2 FILER NAME Jeff Barton		3	ACCOUNT #
4 Date 2/12/94	5 Payee name 2001 Tales 6 Payee address: City: State: Zip Code Neiderwald, TX	7	Amount (\$) 80-
8 Purpose of expenditure Advertising		9 ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office held / sought	
Date 2/16/94	Payee name Hays County Free Press Payee address: City: State: Zip Code P.O. Box 339, Buda, TX 78610	Amount (\$) 291.50	
Purpose of expenditure Advertising		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office held / sought	
Date 2/18/94	Payee name Espinoza Graphics Payee address: City: State: Zip Code 117 North Guadalupe, S.M. 78666	Amount (\$) 320.68	
Purpose of expenditure Printing		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office held / sought	
Date 2/19/94	Payee name Post Office Payee address: City: State: Zip Code Buda, TX 78610	Amount (\$) 372.40	
Purpose of expenditure Bulk mail		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office held / sought	

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POLITICAL EXPENDITURES

SCHEDULE F

See INSTRUCTION GUIDE for detailed instructions.		1	Total pages Schedule F:
2 FILER NAME Jeff Barton		3	ACCOUNT #
4 Date 2/22/94	5 Payee name T.D. Coy	7	Amount (\$) 150-
6 Payee address: City: State: Zip Code #10 Comanche Camp, Kyle, TX 78640			
8 Purpose of expenditure Gas, staples, stakes, etc.		9 ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office held / sought	
Date 2/22/94	Payee name Post office	Amount (\$)	
Payee address: City: State: Zip Code Buda, TX 78610		58-	
Purpose of expenditure Stamps		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office held / sought	
Date 2/22/94	Payee name T.D. Coy	Amount (\$)	
Payee address: City: State: Zip Code #10 Comanche Camp, Kyle, TX 78640		350-	
Purpose of expenditure Labor		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office held / sought	
Date 2/25/94	Payee name Kyle Eagle	Amount (\$)	
Payee address: City: State: Zip Code P.O. Box Kyle, TX 78640		221.72	
Purpose of expenditure Advertising		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office held / sought	

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POLITICAL EXPENDITURES

SCHEDULE F

See INSTRUCTION GUIDE for detailed instructions.		1	Total pages Schedule F:
2 FILER NAME Jeff Barton		3 ACCOUNT #	
4 Date 2/4/94	5 Payee name Sign Crafters	7 Amount (\$) 212.44	
6 Payee address: City: State: Zip Code 700 I-35N, San Marcos, TX 78666			
8 Purpose of expenditure Signs		9 -- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name Office held / sought	
Date 2/5/94	Payee name Post Office	Amount (\$) 39 -	
Payee address: City: State: Zip Code Buda, TX 78610			
Purpose of expenditure mail - Bulk		-- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name Office held / sought	
Date 2/9/94	Payee name Opinion Analysts	Amount (\$) 146.92	
Payee address: City: State: Zip Code 906 Rio Grande, Austin, TX 78701			
Purpose of expenditure Pct. 2 Labels		-- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name Office held / sought	
Date 2/10/94	Payee name Graphic Arts	Amount (\$) 172.80	
Payee address: City: State: Zip Code			
Purpose of expenditure Print Prep: Negs		-- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name Office held / sought	

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